

24/48 HOUR REPORT OF INDEPENDENT EXPENDITURES (Schedule E)

 PAGE 1 OF 1
FOR SE OF FORM 24/48

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|---|--------------------|--|---|---|--|
| NAME OF COMMITTEE (In Full) Spirit of Democracy America | | | FEC IDENTIFICATION NUMBER ▼ C C00521211 | | |
| Check if <input checked="" type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input checked="" type="checkbox"/> New report <input type="checkbox"/> Amends report filed on | | | | | |
| Full Name of Payee McNally Temple Associates, Inc. | | | Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 19 / 2014 | | |
| Mailing Address 1817 Capitol Avenue | | | Amount 21915.14 | | |
| City Sacramento | State CA | Zip Code 95811 | Transaction ID : EDT.E.152 | | |
| Purpose of Expenditure Campaign Literature and Mailing; Paid date 05/19/2014; Dissemination date 05/19/2014 | | Category/ Type 24E | Date of Disbursement or Obligation MM / DD / YYYY 05 / 19 / 2014 | | |
| Name of Federal Candidate Richard Fox | | <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input checked="" type="checkbox"/> House District: 18 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA | | |
| Calendar Year-To-Date Per Election for Office Sought | | 60759.28 | Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2014 <input type="checkbox"/> Other (specify) ▶ | | |
| Full Name of Payee | | | Date of Public Distribution/Dissemination | | |
| Mailing Address | | | Amount | | |
| City | State | Zip Code | Date of Disbursement or Obligation | | |
| Purpose of Expenditure | | Category/ Type | MM / DD / YYYY | | |
| Name of Federal Candidate | | <input type="checkbox"/> Support <input type="checkbox"/> Oppose | Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input type="checkbox"/> Senate State: _____ | | |
| Calendar Year-To-Date Per Election for Office Sought | | | Disbursement For: <input type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶ | | |
| (a) SUBTOTAL of Itemized Independent Expenditures..... ▶ | | | 21915.14 | | |
| (b) SUBTOTAL of Unitemized Independent Expenditures ▶ | | | | | |
| (c) TOTAL Independent Expenditures..... ▶ | | | 21915.14 | | |
| Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent. | | | | | |
| Signature <i>Thomas W. Hiltachk</i> | | [Electronically Filed] | | Date MM / DD / YYYY 05 / 19 / 2014 | |